

W WHODA:	66	ODAS
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This questionnaire asks about difficulties due to health/mental health conditions. Health conditions include diseases or illnesses, other health problems that may be short or long lasting, injuries, mental or emotional problems, and problems with alcohol or drugs. Think back over the past 30 days and answer these questions thinking about how much difficulty you had doing the following activities.

	e snort or long lasting, injuries, mental or emotional problems, and problem ons thinking about how much difficulty you had doing the following activities		iol or c	irugs. Ir	iink back ove	r tne past 3	ou days and answer these
Und	erstanding and communicating						
D1.1	Concentrating on doing something for ten minutes?		None	O Mild	Moderate	Severe	Extreme/Cannot Do
D1.2	Remembering to do important things?	0	None	O Mild	Moderate	Severe	Extreme/Cannot Do
D1.3	Analyzing and finding solutions to problems in day-to-day life?	0	None	O Mild	○ Moderate	Severe	Extreme/Cannot Do
D1.4	Learning a new task, for example, learning how to get to a new place?		None	O Mild	○ Moderate	Severe	Extreme/Cannot Do
D1.5	Generally understanding what people say?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D1.6	Starting and maintaining a conversation?	0	None	Mild	Moderate	Severe	Extreme/Cannot Do
					Domai	n Score Ra	aw Avg
Gett	ing around						
D2.1	Standing for l ong periods, such as 30 minutes?		None	Mild	Moderate	Severe	Extreme/Cannot Do
D2.2	Standing up from sitting down?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D2.3	Moving around inside your home?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D2.4	Getting out of your home?	0	None	O Mild	○ Moderate	Severe	Extreme/Cannot Do
D2.5	Walking a long distance, such as a kilometer (or equivalent)?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
					Domai	n Score Ra	aw Avg
Self-	care						
D3.1	Washing your whole body?		None	Mild	Moderate	Severe	Extreme/Cannot Do
D3.2	Getting dressed?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D3.3	Eating?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D3.4	Staying by yourself for a few days?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
					Domai	n Score Ra	
Gett	ing along with people						
D4.1	Dealing with people you do not know?		None	○ Mild	○ Moderate	Severe	Extreme/Cannot Do
D4.2	Maintaining a friendship?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D4.3	Getting along with people who are close to you?		None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D4.4	Making new friends?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D4.5	Sexual activities?	0	None	Mild	○ Moderate		Extreme/Cannot Do
					Domai	n Score Ra	
Life	activities-Household						
D5.1	Taking care of your household responsibilities?		None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D5.2	Doing most important household tasks well?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D5.3	Getting all of the household work done that you needed to do?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D5.4	Getting your household work done as quickly as needed?		None	Mild	○ Moderate		Extreme/Cannot Do
					Domai	n Score Ra	aw Avg
Life	activities-School/Work						
	work (paid, non-paid, self-employed) or go to school, complete questions D5.5-D5	5.8, below. O	therwis	e, skip to	D6.1.		
D5.5	Your day-to-day work/school?					Severe	Extreme/Cannot Do
D5.6	Doing your most important work/school tasks well?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D5.7	Getting all of the work done that you need to do?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do
D5.8	Getting your work done as quickly as needed?	0	None	Mild	○ Moderate	Severe	Extreme/Cannot Do

				Domai	n Score Ra	W Avg	
Participation in society							
D6,1	How much of a problem did you have in joining in community activities (for example, festivities, religious, or other activities) in the same way as anyone else can?	ONone	O Mild	O Moderate	O Severe	O Extreme/Cani	not Do
D6.2	How much of a problem did you have because of barriers or hindrances around you?	ONone	O Mild	O Moderate	○ Severe	O Extreme/Can	not Do
D6,3	How much of a problem did you have living with dignity because of the attitudes and actions of others?	ONone	O Mild	O Moderate	O Severe	○ Extreme/Canı	not Do
D6.4	How much time did you spend on your health condition or its consequences?	ONone	O Mild	O Moderate	○ Severe	O Extreme/Can	not Do
D6.5	How much have you been emotionally affected by your health condition?	ONone	O Mild	O Moderate	○ Severe	O Extreme/Can	not Do
D6.6	How much has your health been a drain on the financial resources of you or your family?	ONone	O Mild	O Moderate	○ Severe	O Extreme/Can	not Do
D6.7	How much of a problem did your family have because of your health problems?	ONone	O Mild	O Moderate	O Severe	O Extreme/Can	not Do
D6.8	How much of a problem did you have in doing things by yourself for relaxation or pleasure?	○ None	O Mild	O Moderate	O Severe	O Extreme/Can	not Do
				Domai	n Score Ra	w Avg	

General Disability Score Total | Avg ____